PTO/SB/21 (09-04) Doc

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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| TRANSMITTAL FEB 0 3 2006 FORM | | Application Number | | 10//05,989 | | |
|--|--|---|-----------|--|--|--|
| | | Filing Date | | November 12, 2003 | | |
| | | First Named Invento | or | Lilip Lau | | |
| | | Art Unit | | 3736 | | |
| (to be used for all correspondence after initial filling) | | Examiner Name | | Unassigned | | |
| Total Number of Pages in This Submission | 14 | Attorney Docket Nu | mber | PARCR 65989 | | |
| | ENCLOS | URES (Check all th | at apply) | | | |
| Fee Transmittal Form | Drawing(| s) | | After Allowance Communication to TC | | |
| Fee Attached | Licensing | g-related Papers | | Appeal Communication to Board of Appeals and Interferences | | |
| Amendment / Reply | Petition | | [| Appeal Communication to TC (Appeal Notice, Brief, Reply | | |
| After Final | Petition to Convert to a Provisional Application | | | Proprietary Information | | |
| Affidavits/declaration(s) | | Attorney, Revocation of Correspondence Addr | ess | Status Letter | | |
| Extension of Time Request | Terminal Disclaimer | | | Other Enclosure(s) (please identify below): | | |
| Express Abandonment Request | Request | for Refund | | Postcard | | |
| Information Disclosure Statement | Information Disclosure Statement CD, Num | | - | | | |
| Certified Copy of Priority | | Landscape Table on CD |) | · | | |
| Document(s) Remarks | | | | | | |
| Response to Missing Parts/ Incomplete Application | 242 | 201 | | | | |
| Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | | | | | |
| SIGNATUR | RE OF APPLICA | NT, ATTORNEY, OR | AGENT | | | |
| Firm Name FULWIDER PATTO | N LLP | | | | | |
| Signature An / | VYX | | | | | |
| Printed name JOHN'S. NAGY, ESC | 2.00 | | | | | |
| Date January 30, 2006 | | F | Reg. No. | 30,664 | | |
| <u></u> | DTIEICATE O | FTRANSMISSION | /MAII IN | lG . | | |
| CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: | | | | | | |
| Signature Jan Way | | | | | | |
| Typed or printed name SOHN S. NAG | Y, ESQ. V | | Date | January 30, 2006 | | |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Doc Code:

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| Complete if Known | | | | |
|----------------------|-------------------|--|--|--|
| Application Number | 10/705,989 | | | |
| Filing Date | November 12, 2003 | | | |
| First Named Inventor | Lilip Lau | | | |
| Examiner Name | Samuel G. Gilbert | | | |
| Art Unit | 3736 | | | |
| Attorney Docket No. | PARCR 65989 | | | |

FEE TRANSMITTAL for FY 2005

Effective Line 1004. Fees pursuant to the Consolidated Appropriatons Act, 2005 (H.R.

Applicant claims small entity status. See 37 CFR 1.27

| TOTAL AMOUNT OF P. | AYMENT | (\$) | \$110.00 | Attorney Docket | No. PARCI | R 65989 | |
|---|-------------------------------------|------------------------------------|---------------|---|----------------------|------------------------------------|------------------------------------|
| METHOD OF PAYMEN | T (check all | l that apply) | | | | | |
| Check Credit C | Card | Money Order | ☐ None | Other (| please identify): | | |
| Deposit Depo | sit Account | Number: | 06-2425 | Deposit A | ccount Name: | FULWII | DER PATTON |
| For the above-identified of | deposit accou | unt, the Director | is hereby aut | horized to: (check al | I that apply) | | |
| Charge f | ee(s) indicate | ed below | | Charge | fee(s) indicated | below, except for | the filing fee |
| Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | | form. Provide credit | |
| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARC | H, AND EX FILING I | | | H FEES Small Entity | EXAMINA | ATION FEES Small Entity | |
| Application Type | Fee (\$) | <u>Fee (\$)</u> | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees Paid(\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | - |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| EXCESS CLAIM FEES Fee Description Each claim over 20 (include Each independent claim over Multiple dependent claims) | ding Reissu | • |) | | | Fee (\$) 50 200 360 | Small Entity Fee (\$) 25 100 180 |
| Total Claims | Extra | Fee (\$) | ı | Fee Paid (\$) | | Fee (\$) | Dependent Claims Fee Paid (\$) |
| | claims paid fo | x r, if greater than Fee (\$ | \$9.00 = | \$0.00 Fee Paid (\$) \$0.00 | | | |
| HP = highest number of indep 3. APPLICATION SIZE FE If the specification and dra 37 CFR 1.52(e)), the applic See 35 U.S.C. 41(a)(1)(G) | EE wings exceed cation size f | ed 100 sheets ee due is \$25 | of paper (e) | ccluding electronic small entity) for ea | cally filed sequents | uence or compu 50 sheets or fra | uter listing under action thereof. |
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| 4. OTHER FEE(S) | #400 £ | /no one=11 ==4 | hi dinamint | | | | Fee Paid (\$) |
| Non-English specification, Other (e.g., late filing surch | | (no small ent | | | | _ | \$110.00 |
| CURMITTED BY | | | | | | | |

| SUBMITTED BY | | | | | |
|-------------------|--------------------|-----------------------------------|--------|------------------|----------------|
| Signature | John Nory | Registration No. (Attorney/Agent) | 30,664 | Telephone | (310) 824-5555 |
| Name (Print/Type) | JOHN S. NAGY, ESQ. | | Date | January 30, 2006 | |

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